

# BEAUFORT COUNTY SHERIFF'S OFFICE DISCIPLINARY ACTION

Employee Name: Bates, Johnathon Rank: LCpl. Employee # 8062 Warning Date: 5/5/2017

Violation: Conduct Unbecoming (judgment) Location: BCDC 106 Ribaut Rd.

Violation of BCSO Policy #(s): \_\_\_\_\_

Type Violation: ( ) Insubordination ( X ) Conduct ( ) Substandard Work ( ) Policy/Procedure Violation ( ) Attitude  
( ) Other: \_\_\_\_\_

Previous Violation :	Date of Violation:	Oral	Written	Issued By:

Supervisor Comments: I recommend that LCpl. Bates receive this written Reprimand, and further undergo remedial training

In Prisoner Transport and Levels of Force: Please see attached Summary for details of the incident.

Signature: Lt. Robert Arbelo Date: 5/5/2017

Branch Commander Remarks: PLD

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Division Commander Remarks: Based on the video and statements it appears that LCpl. Bates had other options to deal with the suspect.

It is recommended that LCpl. Bates receive this formal written counseling, and that his promotion to Corporal be held until successful completion of six months probation.

Signature: Maj. J. Bukoffsky Date: 5/9/2017

Deputy Chief of Staff Remarks: I agree with the remarks of the above command personnel. LCpl. Bates promotion to Corporal will be suspended, pending successful completion of six months probation.

Signature: Lt. Colonel Allen Horton Date: 5/9/2017

Chief of Staff Remarks: I concur with the above recommendations, and agree that Lance Corporal Bates should have used better judgment in the situation he was confronted with.

Signature: D. A. Brown Date: 5/9/2017

Chief Deputy Remarks: The remarks and the recommendations of the senior supervisory personnel above are appropriate to the policy infraction and is warranted under the circumstances as outlined herein. Promotion eligibility to be reinstated following successful completion of the 6 months probationary period indicated below. No further.

Signature: Michael M. Hatfield Date: 5/10/17

Action To Be Taken: ( ) Verbal Reprimand ( X ) Written Reprimand ( ) Suspension ( ) Termination ( X ) Other: probation

Amount of probation: 6 months

Probation Date(s): 5/9/2017 to 11/9/2017

Employee's Comments: PLEASE SEE MY ATTACHED REBUTAL

I have read this recommendation for Disciplinary Action and understand it.

Employee Signature: [Signature] Date: 5/12/17

Sheriff's Recommendation: ( ) Approval ( ) Disapproval

Sheriff's Comments: REMEDIAL TRAINING "USE OF FORCE", UAB, COMPETENT, REVIEW BY TRAINING SECTION WITH REPORT TO FILE.

RETURN FILE TO ME AFTER COMPLETION. 5-30-17

[Signature]

Certified to be a true and correct copy of the original document on file with the Office of Sheriff for Beaufort County.  
Michael M. Hatfield  
Chief Deputy, Beaufort County Sheriff's Office



COUNTY COUNCIL OF BEAUFORT COUNTY  
DETENTION CENTER  
Multi-Government Center - Post Office Drawer 1228  
Beaufort, South Carolina 29901 - 1228  
Phone (843) 470-5711 Fax: (843) 470-5720

SUPPLEMENTARY REPORT

REPORT NUMBER 20170501-03

PAGE 1 OF 1

ON MAY 1, 2017 AT APPROXIMATE 0230 I WAS STANDING AT THE OFFICER DESK IN INTAKE NEXT TO INMATE KING STEVEN #74140. INMATE KING ASKED OFFICER BATES WHAT HE WAS BEING CHARGED WITH OFFICER BATES STATED HE WAS BEING CHARGED WITH UNLAWFUL POSSESSION OF A WEAPON. INMATE KING RESPONDED BY SAYING HE DIDN'T HAVE A GUN ON HIM SO WHY WAS HE BEING CHARGED. OFFICER BATES SAID HE DIDN'T KNOW, HE WASN'T THE OFFICER WHO IS CHARGING HIM FOR THE OFFENSE. HE WAS JUST TRANSPORTING HIM FOR THE ARRESTING OFFICER. THE NEXT THING I SAW WAS BOTH OFFICER BATES AND INMATE KING WALKING TOWARD EACH OTHER. OFFICER BATES TOOK HIS HAND AND PLACED IT AT THE NECK AREA OF INMATE KING AND PUSH HIM TO THE FLOOR. C/O BOWMAN CAME FROM BEHIND THE COUNTER AND ASSISTED INMATE KING FROM THE FLOOR BECAUSE HE WAS IN RESTRAINTS. I STOOD IN BETWEEN OFFICER BATES AND INMATE KING WHILE CPL BLACK CAME TO ASSIST. CPL BLACK ESCORTED OFFICER BATES DOWN THE HALL TOWARD CENTRAL CONTROL. END OF REPORT.

C/O Pitts #8968  
C/O PITTS #8968

OFFICER INITIATING REPORT

SGT. MCCOWN #7182

SHIFT SUPERVISOR

Orig: Director Copy: Log Book Copy: Classif Copy: Writer

Certified to be a true and correct  
copy of the original document on file with  
the Office of Sheriff for Beaufort County.

Michael M. Hatfield  
Chief Deputy, Beaufort County Sheriff's Office

"Professionally we serve; Personally we care."



P. J. Tanner  
Sheriff

**OFFICE OF SHERIFF  
BEAUFORT COUNTY**  
POST OFFICE BOX 1758  
BEAUFORT, SOUTH CAROLINA 29901

AREA CODE (843)

SHERIFF	255-3200
CHIEF DEPUTY	255-3192
CRIMINAL RECORDS	255-3232
CRIMINAL WARRANTS	255-3228
CIVIL RECORDS	255-3188
JUDGMENTS	255-3189
FAX #	255-9405
WEB SITE	www.bcsd.net

June 21, 2017

*MTT  
6/22/17  
effective this date.*

To: Sheriff P.J. Tanner  
From: LCpl Johnathon E. Bates  
Subj: Letter of Resignation

Sheriff Tanner,

Please accept my resignation from the Beaufort County Sheriff's Office, effective at the close of business, Wednesday, July 5, 2017. I have accepted a job with the Bluffton Police Department. Thank you for allowing me to serve the citizens of Beaufort County as a Deputy Sheriff.

Respectfully,

Johnathon E. Bates

*~~MTT~~ 06/22/17*

*MTT 6/22/17*

Certified to be a true and correct  
copy of the original document on file with  
the Office of Sheriff for Beaufort County.

*Michael M. Hatfield*  
Chief Deputy, Beaufort County Sheriff's Office

WL  
6/27/17



South Carolina Criminal Justice Academy  
Certification-Compliance



PERSONNEL CHANGE IN STATUS REPORT  
NOTIFICATION OF ADMINISTRATIVE/ROUTINE SEPARATION

Beaufort County Sheriff's Office  
Reporting Department

843-255-3138  
Phone #

6/22/17  
Today's Date

Johnathon Bates  
Officer's Name

1450-3320  
Academy I.D. #

Officer's Current Home Address

Beaufort  
City/Town

29906  
Zip Code

- ☒ CHECK ONE: ☐ E-911 (TCO) ☐ Reserve Officer ☐ Coroner ☐ Deputy Coroner  
☒ Class 1 LE ☐ Class 2LCO (Jailer) ☐ Class 1LECO (LEO/Jailer) ☐ Class 3SLE (Limited Duty)

(For all separations ~~NOT~~ involving misconduct as defined in S.C. Reg. 37-025)

PLEASE ATTACH MRN (MANDATORY RETRAINING NOTIFICATION) FORM  
INDICATING IN-SERVICE TRAINING RECEIVED SINCE LAST RENEWAL

(Please check appropriate reason(s) for separation)

Date of Separation: 6/22/17 (specify mo/day/yr)

XXXX Resigned

Retired

Deceased

XXXX Accepted employment with another Law Enforcement Agency

Medical Leave

Military Leave

Failure to successfully complete basic training

Failure to successfully complete in-service training

Transfer from law enforcement classification to law enforcement classification

Termination for violation of AGENCY policy ~~NOT~~ involving misconduct as defined in S.C. Reg. 37-025 (i.e., substandard performance, excessive absenteeism, sleeping on duty, etc)

Other (please specify)

RECEIVED  
JUN 26 2017  
SCCJA CERTIFICATION

DO NOT WRITE "SEE ATTACHED." DO NOT ATTACH, OR SUBMIT, ANY ADDITIONAL DOCUMENTS, OTHER THAN A MANDATORY RETRAINING NOTIFICATION.

I hereby attest that the reason for separation of this officer does ~~NOT~~ involve misconduct or otherwise disqualify eligibility for certification as defined in S.C. Reg. 37-025.

EMPLOYING AGENCY HEAD:

Michael M. Hatfield

DATE:

6/23/17

PRINT NAME:

Michael M. Hatfield

OFFICIAL TITLE: Chief Deputy

CJA USE: MRN: ☒ CODE: ID: 105 DE:

Revised 05/2017

nelson